HOLYOKE MEDICAL CENTER

2015 Hospital Profile

Holyoke, MA Community, High Public Payer Western Massachusetts

Holyoke Medical Center is a mid-size, nonprofit community-High Public Payer (HPP) hospital located in the Western Massachusetts region. Between FY11 and FY15, Holyoke Medical Center had an 11.0% decrease in inpatient discharges, compared to a 9.5% decrease for the median of its peer cohort. Over this time period, its changes in discharges have closely mirrored the peer cohort. Holyoke Medical Center has been profitable for each year in the five year period. In FY15, it had a total margin of 2.8%, lower than the cohort median of 5.4%; over the five year period, Holyoke Medical Center has been close to the median of its peer cohort in both total margin and operating margin.

Overview / Size Hospital System Affiliation: Not Applicable Change in Ownership (FY11-FY15): Not Applicable Total Staffed Beds: 107, mid-size acute hospital % Occupancy: 61.2%, < cohort avg. (65%) CHART^Λ, ICB^θ, DSTI^η Special Public Funding: Trauma Center Designation: Not Applicable Case Mix Index: 0.84, < cohort avg. (0.87); < statewide (1.00)

Financial

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Inpatient NPSR per CMAD:	\$8,965
Change FY14-FY15:	-9.4%
Inpatient:Outpatient Revenue in FY15:	26%:74%
Outpatient Revenue in FY15:	\$69,532,897
Change FY14-FY15:	14.9%
Total Revenue in FY15:	\$127,197,263
Total Surplus (Loss) in FY15:	\$3,580,883

Payer Mix

Public Payer Mix:	75.8% (HPP* Hospital)
CY15 Commercial Relative Price:	0.72
Top 3 Commercial Payers:	Health New England
	Blue Cross Blue Shield of MA
	UniCare

Utilization

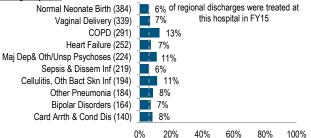
Inpatient Discharges in FY15:	5,727
Change FY14-FY15:	2.4%
Emergency Department Visits in FY15:	41,447
Change FY14-FY15:	-1.3%
Outpatient Visits in FY15:	95,553
Change FY14-FY15:	16.3%

Quality

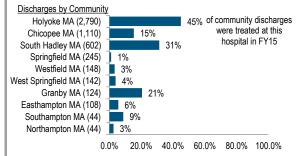
Readmission Rate in FY15:	16.5%
Change FY11-FY15 (percentage points):	-0.7%
Early Elective Deliveries Rate (Jan 2015-Jun 2016):	0.0%

What were the most common inpatient cases (DRGs) treated at the hospital in FY15? What proportion of the region's cases did this hospital treat for each service?



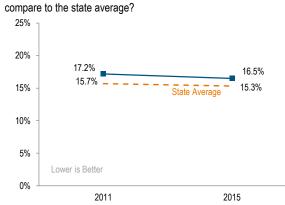


Where did most of the hospital's inpatients reside? What proportion of each community's total discharges was attributed to this hospital?

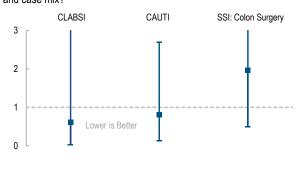


What proportion of adult patient discharges from this hospital resulted in a readmission at any hospital within 30 days, and how does this compare to the state average?

--- Hospital (5,727) = 6% of total regional discharges



How many central line-associated blood stream infections (CLABSI). catheter-associated urinary tract infections (CAUTI), and surgical site infections (SSI) after colon surgery did patients get at this hospital compared to what was expected based on the hospital's characteristics and case mix?

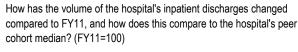


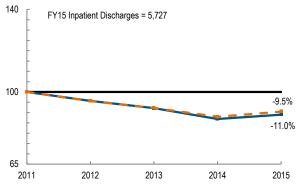
For descriptions of the metrics, please see the technical appendix

2015 HOSPITAL PROFILE: HOLYOKE MEDICAL CENTER

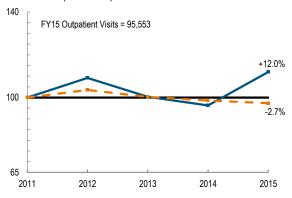
Cohort: Community, High Public Payer



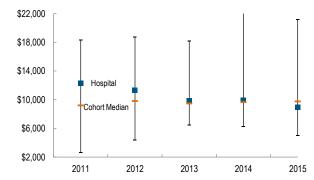




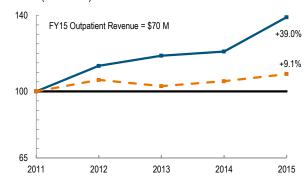
How has the volume of the hospital's outpatient visits changed compared to FY11, and how does this compare to the hospital's peer cohort median? (FY11=100)



What was the hospital's net inpatient service revenue per case mix adjusted discharge between FY11 and FY15, and how does this compare to the hospital's peer cohort median?



How has the hospital's total outpatient revenue changed compared to FY11, and how does this compare to the hospital's peer cohort median? (FY11=100)



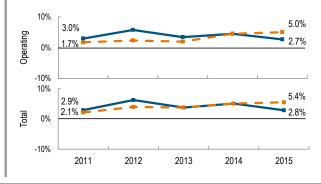
How have the hospital's total revenue and costs changed between FY11 and FY15?

Revenue, Cost, & Profit/Loss (in millions)

Patient Revenue Trends

FY	2011	2012	2013	2014	2015
Operating Revenue	\$ 122	\$ 129	\$ 121	\$ 123	\$ 127
Non-Operating Revenue	\$ (0)	\$ 1	\$ 0	\$ 1	\$ 0
Total Revenue	\$ 122	\$ 130	\$ 122	\$ 123	\$ 127
Total Costs	\$ 119	\$ 122	\$ 117	\$ 117	\$ 124
Total Profit (Loss)	\$ 3.5	\$ 8.0	\$ 4.5	\$ 6.2	\$ 3.6

What were the hospital's total margin and operating margins between FY11 and FY15, and how do these compare to the hospital's peer cohort medians?



For descriptions of the metrics, please see the technical appendix.

 θ For more information on Infrastructure and Capacity Building (ICB) special funding, please contact the Massachusetts Executive Office of Health and Human Services (EOHHS).



[^] For more information on Community Hospital Acceleration, Revitalization and Transformation (CHART) special funding, please contact the Health Policy Commission (HPC).

ⁿFor more information on Delivery System Transformation Initiative (DSTI) special funding, please contact the Massachusetts Executive Office of Health and Human Service (EOHHS).

^{*} High Public Payer Hospitals (HPP) receive a minimum of 63% of gross patient service revenue from public payers.